2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2000 8:00 am Secretary of State DOCUMENT # F9500001419 1. Entity Name NATIONAL MINORITY AIDS COUNCIL, INC. 02-01-2000 90074 007 ****61.25 Mailing Address Principal Place of Business 1931 13TH STREET, NW 1931 13TH STREET, NW WASHINGTON DC 20009 WASHINGTON DC 20009-4432 911944 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 52-1578289 Not Appelled \$8.75 Additional Zip ___Country_____ 5. Certificate of Status Desired -Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BEGLEY, KEITH A 13 MARTIN LUTHER KING BLVD. STUART FL 34995 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 SD TITLE Change Ch ☐ Addition TITLE ■ Delete GEAGA, JAIME NAME NAME Chair, Executive Committee STREET ADDRESS 1931 13TH STREET, NW STREET ADDRESS Primm, Beny 2 Chapel Street Brooklyn, NY 11201 CITY-ST-ZIP CITY-ST-ZIP Washington DC 20009 Change ☐ Addition Delete TITLE TITLE Vice-Chair, Executive Committee NAME MCDONALD, SANDRA NAME pez, Lupe 31 Wallingword Avenue, N. STREET ADDRESS 3030 CAMPBELLTON RD., SW ---STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP atlanta ga Seattle, WA 98103 Change ☐ Addition PD Delete TITLE At Large Board Member NICKENS, NORMAN NAME Bau, Ignatius 25 VAN NESS AVENUE, 5TH FLOOR STREET ADDRESS STREET ADDRESS 942 Market Street, Suite 200 CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA <u>San Francisco, CA 94102</u> Change Addition TITLE ٧D Delete TITLE NAME CYR-DELPE, MARIE NAME STREET ADDRESS STREET ADDRESS 2271 SECOND AVE. CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY** □ Delete Treasurer, Committee Change ■ Addition TITLE Executive ' TITLE NAME NAME BEAN, CARL Singleton, Pandora STREET ADDRESS STREET ADDRESS 5149 W. JEFFERSON BLVD 2111 Price Street, Project Azuka CITY~ST-ZIP CITY-ST-ZIP LOS ANGELES CA Savannah, CA 31401 ☐ Change ☐ Addition ুত্রি Delete TITLE TITLE ED NAME KAWATA, PAUL NAME STREET ADDRESS STREET ADDRESS 1931 13TH STREET, NW CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20009

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Paul Kawata 202-483-5
Date Dayline Phone #